

DEC 14 2006

TRANSMITTAL LETTER
(General - Patent Pending)

Docket No.
0019B

In Re Application Of: Sigel et al

Application No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.
10/807,966	3/24/2004	Ferguson, Lawrence D.	00112	1774	4098

Title: SURFACE COVERING HAVING GLOSS IN-REGISTER AND METHOD OF MAKING

COMMISSIONER FOR PATENTS:

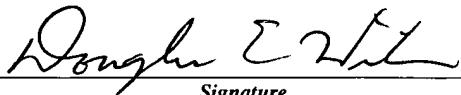
Transmitted herewith is:

Revocation of POA with New POA
Return Post Card

in the above identified application.

- No additional fee is required.
- A check in the amount of _____ is attached.
- The Director is hereby authorized to charge and credit Deposit Account No. _____ as described below.
 - Charge the amount of _____.
 - Credit any overpayment.
 - Charge any additional fee required.
- Payment by credit card. Form PTO-2038 is attached.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.



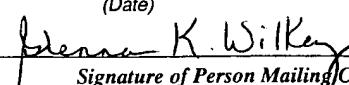
Signature

Dated: December 12, 2006

Douglas E. Winters
Reg. No. 29,990

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on 12/12/2006.

(Date)

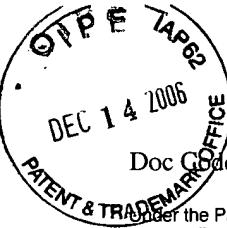


Signature of Person Mailing Correspondence

Glenna K. Wilkey

Typed or Printed Name of Person Mailing Correspondence

cc:



Doc Code: 0019B

PTO/SB/82 (01-06)

Approved for use through 12/31/2008. OMB 0651-0035

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/807,966
Filing Date	3/24/2004
First Named Inventor	Sigel, Gary A.
Art Unit	1774
Examiner Name	Ferguson, Lawrence D.
Attorney Docket Number	0019B

I hereby revoke all previous powers of attorney given in the above-identified application:

A Power of Attorney is submitted herewith.

OR

I hereby appoint the practitioners associated with the Customer Number: 00112

Please change the correspondence address for the above-identified application to:

The address associated with Customer Number:

OR

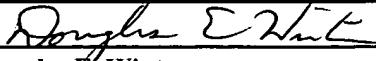
<input checked="" type="checkbox"/> Firm or Individual Name	Armstrong World Industries, Inc.				
Address	2500 Columbia Avenue P. O. Box 3001				
City	Lancaster	State	PA	ZIP	17604-3001
Country	USA				
Telephone	717.396.4070	Email	dewinters@armstrong.com		

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71
Statement under 37CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	Douglas E. Winters		
Date	12/12/06	Telephone	717.396.4070

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 2 forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending on the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.